

TARION SPPICAL SPPICAL

TOWN OF MARION HARBORMASTER / SHELLFISH DEPARTMENT

2 Spring Street
Marion, MA 02738
Tel. 508-748-3515 (Town House) 508-748-3535 (Waterfront)

\$15.00 FEE

FOR OFFICE USE ONLY
Date Received:
Time Received:
By:

APPLICANT INFORMATION				
NAME	TELEPHONE NUM	BER		
MAILING ADDRESS	CITY/TOWN	STATE	E ZIP	
RESIDENCE ADDRESS	CITY/TOWN	STATE	ZIP	
EMAIL ADDRESS:				
BOAT INFORMATION				
BOAT NAME	LENGTH	BEAM	DRAFT	
REGISTERED TO		POW	/ER	
REQUESTING A NEW MOORING				
	EACH LOCATION IS A \$15.	00 FILING FEE.		
☐ INNER HARBOR ☐ WING'S COVE ☐ BLANKINSHIP COVE	☐ JOB'S COVE ☐ AUCOOT COVE ☐ PLANTING ISLAND COVE	_	Pick desired area below) Area 3 Area 4 Beach between Bass point 2 & 4	
REQUESTING A RELOCATION		You can only relocate wit		
REASON FOR REQUEST TO A NEW M	MOORING			
RELOCATION FROMTO				
REQUESTING A BOAT INCREASE				
INCREASE BOAT SIZE FROM	TO	Mooring Number #		
NEW BOAT NAME MA	AKE MODEL	BEAM	DRAFT	
ACCESS INFORMATION				
Due to the lack of public access to most harbors Your application will not be accepted unless you Where will you park? Whose property is this? How will you get to your mooring? If dinghy needs tie up - where?	·		oring is approved.	
APPLICANT SIGNATURE:		DATE:		
FOR USE BY HARBORMASTER				
☐ APPROVED ☐ DISAPPROVED	PERMIT#	DATE:	Marion Harbormaster	